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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this ar amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Bobbie First name Jean Middle name Galmore Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5788		

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Debtor 1 Bobbie Jean Galmore

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	600 N. County Street, #6	If Debtor 2 lives at a different address:
		Waukegan, IL 60085 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Lake	Causalia
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Bobbie Jean Galmore

Case number (if known)

ar	t 2: Tell the Court About	Your B	ankruptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are				n of each, see Nof page 1 and ch			342(b) for Individuals F	iling for Bankruptcy	
	choosing to file under	■ Chapter 7 □ Chapter 11								
		□с	□ Chapter 12							
		□с	hapter 13							
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are	e paying the f	fee yourself, you n	erk's office in your local nay pay with cash, casl rney may pay with a cre	nier's check, or money	
							s option, sign and	attach the Application f	or Individuals to Pay	
			I request that but is not requ	t my fee be w uired to, waive	your fee, and m	request this ay do so only	y if your income is		official poverty line that	
								s). If you choose this op 3B) and file it with your		
).	Have you filed for bankruptcy within the	■ No								
	last 8 years?	□ Ye				14 /1		O		
			District			When				
			District District			When		Case number Case number		
			District			vviieii		Case number		
10.	Are any bankruptcy cases pending or being	■ No)							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye) S.							
			Debtor					Relationship to you		
			District			When		Case number, if know	n	
			Debtor					Relationship to you		
			District			When		Case number, if know	n	
11.	Do you rent your residence?	■ No	Go to li	ne 12.						
		□ Ye	es. Has yo	ur landlord ob	tained an evictio	n judgment a	against you and do	you want to stay in you	ur residence?	
				No. Go to line	12.					
				Yes. Fill out Inbankruptcy pe		About an Evi	ction Judgment Ag	gainst You (Form 101A)	and file it with this	

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Desc Main Document Page 4 of 52 Case number (if known) Debtor 1 **Bobbie Jean Galmore** Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A))

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

> For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

I am not filing under Chapter 11. No.

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

Stockbroker (as defined in 11 U.S.C. § 101(53A))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

None of the above

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

■ No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Bobbie Jean Galmore

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 52 Case number (if known) Debtor 1 **Bobbie Jean Galmore** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Bobbie Jean Galmore Signature of Debtor 2 **Bobbie Jean Galmore** Signature of Debtor 1

September 15, 2016 MM / DD / YYYY

Executed on

MM / DD / YYYY

Executed on

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Debtor 1 Bobbie Jean Galmore Document Page 7 of 52 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ ABRAH	IAM MICHELSON	Date	September 15, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
	M MICHELSON		
Printed name			
MICHELSO	ON LAW OFFICE		
Firm name			
P.O. BOX	67		
617 - 6TH	STREET		
RACINE, V	NI 53401-0067		
Number, Street,	City, State & ZIP Code		
			amichelson@michelsonlawracine.co
Contact phone	262-638-8400	Email address	m
6310798			
Bar number & S	tate		

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			THE FAUL OULSE	
Fill in this infor	mation to identify your	case:		
Debtor 1	Bobbie Jean Galı	more		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

if this is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

rty (Official Form 106A/B) I real estate, from Schedule A/B	\$\$ \$ Your lial Amount y	6,843.00
of all property on Schedule A/B r Liabilities Who Have Claims Secured by Property (Official Form 106D) listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Your lial	6,843.00
Who Have Claims Secured by Property (Official Form 106D) listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Your lial	bilities
Who Have Claims Secured by Property (Official Form 106D) listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Amount	
listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Amount	
listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	
rs Who Have Unsecured Claims (Official Form 106E/F)		7,625.00
ms from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
ms from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	25,239.00
Your total liabilities	\$	32,864.00
r Income and Expenses		
ne (Official Form 106I) nonthly income from line 12 of Schedule I	\$	1,746.00
enses (Official Form 106J) penses from line 22c of <i>Schedule J</i>	\$	1,746.00
Questions for Administrative and Statistical Records		
	other sche	edules.
you have?		
n G	monthly income from line 12 of Schedule I	monthly income from line 12 of Schedule I

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Page 9 of 52 Case number (if known) Debtor 1 Bobbie Jean Galmore

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

691.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Document Page 10 of 52 Fill in this information to identify your case and this filing: Debtor 1 **Bobbie Jean Galmore** Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number ☐ Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put DODGE Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: **GRAND CARAVAN** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2005 Debtor 2 only Current value of the Current value of the 184.000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$2,500.00 \$2,500.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,500.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the

portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

Debtor 1	Bobbie Jean	Documer Galmore	nt Page 11 of 52 Case number	(if known)
■ Yes.	Describe			
		COUCH \$75, BED \$50, LIVING RO \$25 AND OTHER MISCELLANEO INDIVIDUYALLY WORTH MORE		\$800.00
□No	les: Televisions ar	nd radios; audio, video, stereo, and digita phones, cameras, media players, games	al equipment; computers, printers, scanner s	s; music collections; electronic devices
		CELL PHONE		\$100.00
		TV'S		\$50.00
Example No		figurines; paintings, prints, or other artwo	ork; books, pictures, or other art objects; st	amp, coin, or baseball card collections;
Example No	nent for sports an les: Sports, photog musical instru Describe	graphic, exercise, and other hobby equip	ment; bicycles, pool tables, golf clubs, skis	s; canoes and kayaks; carpentry tools;
■ No		s, shotguns, ammunition, and related equi	ipment	
□ No		othes, furs, leather coats, designer wear,	shoes, accessories	
		EVERYDAY CLOTHES, SHOES & SCARVES, ETC.	& ACCESSORIES SUCH AS HATS,	\$300.00
□ No		welry, costume jewelry, engagement rings	s, wedding rings, heirloom jewelry, watche	s, gems, gold, silver
		MISCELLANEOUS JEWELRY		\$300.00
Exam _l ■ No □ Yes.	arm animals ples: Dogs, cats, b Describe ther personal and		v list, including any health aids you did।	not list
☐ Yes.	Give specific info	ormation		

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Debtor 1 **Bobbie Jean Galmore** 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,550.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No **CASH ON** \$15.00 **HAND** 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: Yes..... **CONSUMERS COOPERATIVE CREDIT UNION** \$41.00 **CHECKING** 17 1 \$97.00 FIRST MID-WEST BANK 17.2. CHECKING 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... % of ownership: Name of entity: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. **SAUNDERS REAL ESTATE** RENT \$675.00

Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Document Debtor 1 **Bobbie Jean Galmore** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **HEALTH INSURANCE THRU** NO BENEFICIARY & OF \$0.00 **EMPLOYER** NO VALUE TO ESTATE FORESTER'S LIFE INSURANCE \$280.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..

Case 16-29449

Doc 1

Filed 09/15/16

Entered 09/15/16 14:34:42

Desc Main

5.1.	Case 16-29449	Doc 1	Filed 09/15/16 Document	Entered 09/15/16 14:34:42 Page 14 of 52	
Debtor 1	Bobbie Jean Galmore)		Case number (if known)	
Exam □ No -	s against third parties, when ples: Accidents, employment. Describe each claim			it or made a demand for payment to sue	
		SOCIA	AL SECURITY CLAIM		Unknown
□ No	contingent and unliquidate . Describe each claim	ed claims o	f every nature, includin	g counterclaims of the debtor and rights t	o set off claims
. 55.			CIPATED 2016 INCOM	ME TAX REFUND (ESTIMATED -	\$1,685.00
36. Add				ny entries for pages you have attached	\$2,793.00
Part 5: De	escribe Any Business-Related	Property You	u Own or Have an Interest I	n. List any real estate in Part 1.	
	own or have any legal or equitons to Part 6.	table interest	in any business-related p	roperty?	
_	Go to line 38.				
	escribe Any Farm- and Comme you own or have an interest in fa			n or Have an Interest In.	
■ No	ou own or have any legal or o. Go to Part 7. s. Go to line 47.	equitable i	nterest in any farm- or o	commercial fishing-related property?	
Part 7:	Describe All Property You C	Own or Have	an Interest in That You Dic	l Not List Above	
53. Do yo	u have other property of ar	ny kind you	did not already list?		
■ No	nples: Season tickets, country . Give specific information		ership		
54. Add	the dollar value of all of yo	ur entries f	rom Part 7. Write that n	umber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document Debtor 1 **Bobbie Jean Galmore**

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$2,500.00	_	
57.	Part 3: Total personal and household items, line 15	\$1,550.00		
58.	Part 4: Total financial assets, line 36	\$2,793.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$6,843.00	Copy personal property total	\$6,843.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62		_	\$6,843.00

Official Form 106A/B Schedule A/B: Property page 6 Case 16-29449 Doc 1 Filed 09/15/16 Entered 09/15/16 14:34:42 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Bobbie Jean Galr	nore		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	identity	y tne Property	You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on
Current value of the
Amount of the exemption you claim

Schedule A/B that lists this property	portion you own			
	Copy the value from Check only one box for each exemption. Schedule A/B			
COUCH \$75, BED \$50, LIVING ROOM FURNITURE \$150, DRESSER \$25	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
AND OTHER MISCELLANEOUS HOUSEHOLD ITEMS (NONE INDIVIDUYALLY WORTH MORE THAN \$20) \$500. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
CELL PHONE Line from Schedule A/B: 7.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line Holli Schedule AVB. 7.1			100% of fair market value, up to any applicable statutory limit	
TV'S Line from Schedule A/B: 7.2	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
Line Holli Schedule A.B. 1.2			100% of fair market value, up to any applicable statutory limit	
EVERYDAY CLOTHES, SHOES & ACCESSORIES SUCH AS HATS.	\$300.00		\$300.00	735 ILCS 5/12-1001(a)
SCARVES, ETC. Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Bobbie Jean Galmore Case number (if known)

				` ' '	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	MISCELLANEOUS JEWELRY Line from Schedule A/B: 12.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
	Line nom Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit	
	CASH ON HAND Line from Schedule A/B: 16.1	\$15.00		\$15.00	735 ILCS 5/12-1001(b)
	Ellie Holli Genedale PAB. 10.1			100% of fair market value, up to any applicable statutory limit	
	CHECKING: CONSUMERS COOPERATIVE CREDIT UNION	\$41.00		\$41.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	CHECKING: FIRST MID-WEST BANK Line from Schedule A/B: 17.2	\$97.00		\$97.00	735 ILCS 5/12-1001(b)
	Line nom Schedule AVD. 17.2			100% of fair market value, up to any applicable statutory limit	
	RENT: SAUNDERS REAL ESTATE Line from Schedule A/B: 22.1	\$675.00		\$675.00	735 ILCS 5/12-1001(b)
	Line nom Schedule AVD. 22.1			100% of fair market value, up to any applicable statutory limit	
	FORESTER'S LIFE INSURANCE Line from Schedule A/B: 31.2	\$280.00		\$280.00	215 ILCS 5/238
	Ellie Holli ossiodale 772. CTI2			100% of fair market value, up to any applicable statutory limit	
	ANTICIPATED 2016 INCOME TAX REFUND (ESTIMATED - PRORATED)	\$1,685.00	•	\$1,685.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 34.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No □ Yes. Did you acquire the property cover □ No	3 years after that for ca	ases fi		
	☐ Yes				

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`	Case 10-29449		age 18	of 52	34.42 Desci	wani
Fill in this inf	ormation to identify you					
Debtor 1	Bobbie Jean G	almore				
Debior 1	First Name		st Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name La	st Name			
United States	Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLINC)IS			
Case number						
(if known)					☐ Chec	k if this is an
					amer	nded filing
Official Fo	orm 106D					
Schedul	e D: Creditors	s Who Have Claims Se	cured	by Propert	V	12/15
Po os completo	and accurate as possible	If two married people are filing together b	ath are equ	ally recognition for a	unnlying correct inform	action If more enece
	the Additional Page, fill it	If two married people are filing together, bout, number the entries, and attach it to the				
1. Do any credit	ors have claims secured b	y your property?				
☐ No. Ch	neck this box and submit t	this form to the court with your other sch	edules. Yo	u have nothing else t	o report on this form.	
Yes Fi	ill in all of the information	helow		_		
		below.				
	t All Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the creditor s a particular claim, list the other creditors in F		Amount of claim	Value of collateral	Unsecured
		ical order according to the creditor's name.	u., 217, 10	Do not deduct the	that supports this	portion
Turner	Acceptance			value of collateral.	claim	If any
2.1 Corpor		Describe the property that secures the o	claim:	\$7,625.00	\$2,500.00	\$5,125.00
Creditor's N		2005 DODGE GRAND CARAVA	N			
		184,000 miles				
		As of the date you file, the claim is: Chec				
_	. Western Avenue	apply.	Train triat			
	jo, IL 60625	Contingent				
Number, S	treet, City, State & Zip Code	Unliquidated				
Who owes the	e debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
_		_				
Debtor 1 onl	•	 An agreement you made (such as morte car loan) 	gage or secu	ired		
Debtor 2 onl	•					
Debtor 1 and		☐ Statutory lien (such as tax lien, mechan	ic's lien)			
	of the debtors and another	☐ Judgment lien from a lawsuit				
community	s claim relates to a y debt	☐ Other (including a right to offset)				
Date debt was	incurred	Last 4 digits of account number				

Add the dollar value of your entries in Column A on this page. Write that number here: \$7,625.00 If this is the last page of your form, add the dollar value totals from all pages. \$7,625.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 19 of	52				
Fill in this inf	ormation to identify your case:							
Debtor 1	Bobbie Jean Galmore							
	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name					
United States	Bankruptcy Court for the: NO	RTHERN DISTRICT OF IL	LINOIS					
Case number (if known)							if this is a ed filing	n
Official Fo	orm 106E/F							
	E/F: Creditors Who	Have Unsecured	Claims				12/1	5
Schedule D: Cre eft. Attach the (name and case	ecutory Contracts and Unexpired L editors Who Have Claims Secured I Continuation Page to this page. If y number (if known).	oy Property. If more space is ou have no information to re	needed, copy the Par	t you need, fill it out,	number the	entries ir	the boxe	s on the
	t All of Your PRIORITY Unsecu							
	ditors have priority unsecured claim	ms against you?						
□ No. Go	to Part 2.							
Yes. 2. List all of y	your priority unsecured claims. If a	creditor has more than one pri	ority unsecured claim, li	st the creditor separate	ly for each c	laim. For	each claim	listed,
possible, lis	at type of claim it is. If a claim has both at the claims in alphabetical order acco ore than one creditor holds a particula	ording to the creditor's name. If	f you have more than tw					
	lanation of each type of claim, see the	<i>'</i>						
	,		· · · · · · · · · · · · · · · · · · ·	Total claim	Priority amount		Nonprior amount	ity
	is Dept. of Revenue	Last 4 digits of accou	ınt number	\$0.00		\$0.00		\$0.00
	/ Creditor's Name	When was the debt in	ncurred?					
	Box 64338				-			
	ago, IL 60664-0338							
	er Street City State Zlp Code rred the debt? Check one.		e, the claim is: Check a	all that apply				
_		☐ Contingent						
Debtor	r 1 only	☐ Unliquidated						
☐ Debtor	r 2 only	☐ Disputed						
☐ Debtor	r 1 and Debtor 2 only	Type of PRIORITY un	secured claim:					
☐ At leas	st one of the debtors and another	☐ Domestic support of	bligations					
☐ Check	if this claim is for a community de	ebt Taxes and certain of	other debts you owe the	government				
Is the clai	im subject to offset?	_	personal injury while yo					
■ No		Other. Specify						
Пyes			OTICE ONLY					

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Bobbie Jean Galmore	Case number (if know)	
2.2 Internal Revenue Service	Last 4 digits of account number \$0.00 \$	50.00 \$0.00
Priority Creditor's Name Centralized Insolvency Operations	When was the debt incurred?	
P.O. Box 7346		
Philadelphia, PA 19101-7346		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Domestic support obligations	
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government	
Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicated	
■ No	☐ Other. Specify	
Yes	NOTICE ONLY	
unsecured claim, list the creditor separately for each c	e alphabetical order of the creditor who holds each claim. If a creditor has more that laim. For each claim listed, identify what type of claim it is. Do not list claims already income creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
		Total claim
4.1 Amerifirst Home Mortgage	Last 4 digits of account number 1209	\$17,094.00
Nonpriority Creditor's Name 950 Trade Centre Way, Ste. 400 Portage, MI 49002	When was the debt incurred?	-
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other Specify JUDGMENT	

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Case number (if know)

4.2	AT&T	Last 4 digits of account number	\$30.00
	Nonpriority Creditor's Name SBC Bankruptcy Desk P.O. Box 769	When was the debt incurred?	
	Arlington, TX 76004	_	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify PHONE SERVICE	
	La res	Other. Specify PHONE SERVICE	
4.3	ChexSystems	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Attn: Consumer Relations 7805 Hudson Road, Ste. 100	When was the debt incurred?	
	Woodbury, MN 55125-1595 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Dobligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify NOTICE ONLY	
4.4	CitiMortgage, Inc.	Last 4 digits of account number 2029	\$0.00
	Nonpriority Creditor's Name		
	Attn: Bankruptcy P.O. Box 6243	When was the debt incurred?	
	Sioux Falls, SD 57117-6243 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other Specific NOTICE ONLY	

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Obbie Jean Galmore Case number (if know)

Debto	Bobbie Jean Galmore		Case number (if know)	
4.5	Comcast Corporate Office Headquarters	Last 4 digits of account number		\$217.00
	Nonpriority Creditor's Name Attn: Bankruptcy One Comcast Center	When was the debt incurred?		
	Philadelphia, PA 19103-2838 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.5 o. and date you me, and claim	ior chock an that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify SERVICES		
4.6	Consumer Financial Services	Last 4 digits of account number	2701	\$2,630.00
	Nonpriority Creditor's Name	_	0	
	300 South Green Bay Road Waukegan, IL 60085	When was the debt incurred?	Opened 6/01/12 Last Active 9/30/12	
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
	Yes	■ Other Specify NOTICE OF	NLY	
4.7	Early Warning Services	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name 16552 North 90th Street #100	When was the debt incurred?		
	Scottsdale, AZ 85260			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	□ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□ Yes	Other Specific NOTICE OF		

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Debio	Bobbie Jean Gairiore	Case Hullibel (II kilow)	
4.8	Equifax Information Services LLC	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name P.O. Box 740256	When was the debt incurred?	
	Atlanta, GA 30374-0256 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify NOTICE ONLY	
4.9	Experian	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name		•
	Attn: Bankruptcy 955 American Lane	When was the debt incurred?	
	Schaumburg, IL 60173-4983		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify NOTICE ONLY	
4.1	HSBC	Last 4 digits of account number 8559	\$515.00
0	Nonpriority Creditor's Name	Last 4 digits of account number 8559	Ψ313.00
	Attn. Bankruptcy Department	When was the debt incurred?	
	PO Box 5213		
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify MISCELLANEOUS CHARGE PURCHASES	

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Document Page 24 of 52 Debtor 1 Bobbie Jean Galmore Case number (if know) 4.1 Secure 24 Alarm Systems \$810.00 Last 4 digits of account number Nonpriority Creditor's Name 2258 Schuetz Road, Suite 210 When was the debt incurred? Saint Louis, MO 63132 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify SERVICES ☐ Yes 4.1 Select Physical Therapy \$113.00 Last 4 digits of account number 2 Nonpriority Creditor's Name When was the debt incurred? 15 Tower Court Gurnee, IL 60031 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify MEDICAL SERVICES ☐ Yes 4.1 TeleCheck, Inc. \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Department When was the debt incurred? P.O. Box 4451 Houston, TX 77210-4451 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed

☐ Yes

☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

debt

■ No

Debt	Case 16-29449 Doc 1 Bobbie Jean Galmore	Filed 09/15/16	ain
4.1 4	The North Shore Podiatry Group	Last 4 digits of account number	\$220.00
	Nonpriority Creditor's Name 36100 N Brookside Drive, Ste. 105 Gurnee, IL 60031	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify MEDICAL SERVICES	
4.1	Trans Union Corporation	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	P.O. Box 2000 Crum Lynne, PA 19022-2002	when was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify NOTICE ONLY	
4.1	United Credit Co	Last 4 digits of account number 8439	\$810.00
<u>`</u>	Nonpriority Creditor's Name	Last 4 digits of account number	ψο το.σο
	Attn: Bankruptcy	When was the debt incurred?	
	512 Madison St		
	St Charles, MO 63301 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Offect all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debitor 2 only		

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another \square Student loans $\hfill\Box$ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Secure 24 ☐ Yes

Case 16-29449 Doc 1 Filed 09/15/16 Entered 09/15/16 14:34:42 Desc Main Document Page 26 of 52 Case number (if know) Debtor 1 Bobbie Jean Galmore Vista Health/Waukegan Illinois 4.1 \$2,800.00 Last 4 digits of account number Hospital Nonpriority Creditor's Name 1324 N. Sheridan Road When was the debt incurred? Waukegan, IL 60085-2161 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify JUDGMENT ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Choice Recovery** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims 1550 Old Henderson Road, Suite 100-S Columbus, OH 43220 Last 4 digits of account number 6971 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Consumer Financial Services** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 10431 US Highway 19 Part 2: Creditors with Nonpriority Unsecured Claims Port Richey, FL 34668 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Convergent Outsourcing, Inc. Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 9004 Part 2: Creditors with Nonpriority Unsecured Claims Renton, WA 98057-9004 Last 4 digits of account number 3725 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Enhanced Recovery Corporation** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Attn: Client Services** Part 2: Creditors with Nonpriority Unsecured Claims 8014 Bayberry Road Jacksonville, FL 32256 Last 4 digits of account number 0752 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Nationwide Recovery Service, Inc. Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 19401 - 40th Avenue W., Ste. 130 Part 2: Creditors with Nonpriority Unsecured Claims Lynnwood, WA 98036 Last 4 digits of account number 5538

Name and Address
Portfolio Recovery Associates, LLC
Attn: Bankruptcy
PO Box 41067
Norfolk, VA 23541

On which entry in Part 1 or Part 2 did you list the original creditor?

Line <u>4.10</u> of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 8559

Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

United Credit Company Line <u>4.11</u> of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

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Debtor 1 Bobbie Jean Galmore

Attn: Bankruptcy 512 Madison Street Saint Charles, MO 63301

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

8439

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	C.	Charlest Leave	C4	Total Claim
T. (.)	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 25,239.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 25,239.00

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Fill in this information to identify your case:								
Debtor 1								
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS					
Case number								
(if known)								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Sanders Real Estate Solutions Inc 500 N. Randall Rd. #479 Batavia, IL 60510 Case 16-29449 Doc 1 Filed 09/15/16 Entered 09/15/16 14:34:42 Desc Main

		Docume	<u>nt Page 29 of</u>	5/	
Fill in th	is information to identify your				
Debtor 1	Bobbie Jean Galr	nore			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
		NORTHERN DISTRICT	OE ILLINOIS		
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nul (if known)	mber				☐ Check if this is an amended filing
Officia	al Form 106H				
Sche	dule H: Your Code	ebtors			12/15
people a		ally responsible for supp boxes on the left. Attach	lying correct information the Additional Page to	n. If more space is I	needed, copy the Additional Page, p of any Additional Pages, write
1. D	o you have any codebtors? (If y	ou are filing a joint case, o	do not list either spouse as	s a codebtor.	
□ N ■ Y					
	lithin the last 8 years, have you ona, California, Idaho, Louisiana,				
_	o. Go to line 3. es. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in liı Forr	ne 2 again as a codebtor only i	f that person is a guarant	tor or cosigner. Make su	ire you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1	JD GALMORE 600 North County Street Apt #6 Batavia, IL 60510			☐ Schedule D, I☐ Schedule E/F☐ Schedule G☐ Sanders Real E	, line
3.2	JD GALMORE 600 North County Street Apt #6 Batavia, IL 60510			☐ Schedule D, I ☐ Schedule E/F ☐ Schedule G ☐ Consumer Fina	, line <u>4.6</u>

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						-				
Fill	in this information to identify your	case:								
Del	btor 1 Bobbie Je	an Galmore			_					
	btor 2				_					
Uni	ited States Bankruptcy Court for the	ne: NORTHERN DISTRIC	T OF ILLINOIS							
(If kr	fficial Form 106I					☐ Ai		ed filing ent showir as of the f	ng postpetition following date:	
	chedule I: Your Inc									12/1
sup spo atta	as complete and accurate as popularing correct information. If you are separated and you cha separate sheet to this form	ou are married and not filir our spouse is not filing wi n. On the top of any addition	ng jointly, and your : th you, do not inclu	spouse i de inforr	s liv nati	ring with on about	you, incl your sp	ude infor	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed				☐ Empl	oyed mployed		
	employers.	Occupation								
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include studen or homemaker, if it applies.	t Employer's address								
		How long employed the	nere?							
Par	rt 2: Give Details About M	onthly Income								
Esti spou	imate monthly income as of the use unless you are separated.		you have nothing to r	eport for	any	line, write	\$0 in the	space. In	clude your no	n-filing
•	ou or your non-filing spouse have a e space, attach a separate sheet		mbine the informatio	n for all e	mpl	oyers for t	that perso	on on the I	ines below. If	you need
						For Deb	otor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$		0.00	\$	N/A	

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Debt	tor 1	Bobbie Jean Galmore	-	С	ase number (<i>if kr</i>	iown)					
					For Debtor 1		For	Debtor	2 01		
					roi Debioi i			า-filing s			
	Сор	y line 4 here	4.		\$(.00	\$		N/A	_	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.	. :	\$ 0	.00	\$		N/A		
	5b.	Mandatory contributions for retirement plans	5b.	. :		0.00	\$		N/A	_	
	5c.	Voluntary contributions for retirement plans	5c.	. :	\$ 0	.00	\$		N/A	_	
	5d.	Required repayments of retirement fund loans	5d.		. —	.00	\$_		N/A	_	
	5e.	Insurance	5e.			0.00	\$_		N/A	_	
	5f.	Domestic support obligations	5f.		. —	0.00	\$_ \$		N/A	_	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.		·	0.00	+ \$ [—]		N/A N/A	_	
6					·		· •	-		_	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		` `	0.00	· —		N/A	_	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	,		0.00	\$_		N/A	_	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total	0-		Φ		Φ.				
	8b.	monthly net income. Interest and dividends	8a. 8b.			0.00	\$ \$		N/A N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent			Ψ	.00	Ψ		IN/A	_	
	00.	regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce	0-		Φ		Φ.				
	8d.	settlement, and property settlement. Unemployment compensation	8c. 8d.			0.00	\$_ \$		N/A N/A		
	8e.	Social Security	8e.		\$1,055		\$ -		N/A		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.)				Ф			_	
	9.0	Specify: Pension or retirement income	_ 8f. 8g.			0.00	\$_ \$		N/A N/A	_	
	8g. 8h.	Other monthly income. Specify: CONTRIBUTION FROM HUSBAND			·		+ \$		N/A	_	
	· · · ·	OCETAIDO HOR TROM HOUDAIN	_	_		.00	_		14/7	_	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,746	6.00	\$_		N/A	A	
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	1,746.00	+ \$		N/A	= \$	1,746.00	
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		—	1,1 40.00	-		14/4		1,140.00	
11.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00										
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$Combi	1,746.00 ned	
13.	Doy	you expect an increase or decrease within the year after you file this form	?							ly income	
		No.									
		Yes Explain:									

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Fill	in this informa	tion to identify yo	our case:					
Debt	tor 1	Bobbie Jean	Galmore	9		Che	ck if this is:	
Debt	tor 2						An amended filing	wing postpetition chapter
	ouse, if filing)						13 expenses as of	
Unite	ed States Bankr	ruptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Case	e number							
(If kr	nown)							
Of	ficial Fo	rm 106J						
		J: Your	Evner	1808				12/15
Be a info nun	as complete a ormation. If m nber (if know	and accurate as	possible eded, atta y questio	. If two married people ar				or supplying correct
Part 1.	Is this a joir		enoia					
	■ No. Go to		in a senar	ate household?				
	□ 163. D06		п а зераг	ate flousefloid:				
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
۷.	Do not list D	•	_	Fill out this information for	Dependent's relat	ionshin to	Dependent's	Does dependent
	Debtor 2.	ebioi i and	☐ Yes.	each dependent	Debtor 1 or Debto		age	live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No
							_	☐ Yes ☐ No
								☐ No
								□ No
								☐ Yes
3.		enses include		No				
		f people other t d your depende	han $_{oldsymbol{\sqcap}}$	Yes				
Part	9: Estim	ate Your Ongoi	na Month	ly Fynansas				
Esti exp	imate your ex	penses as of ye	our bankr	uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the following the second sec	orm as a su J, check t	upplement in a Cha he box at the top o	apter 13 case to report of the form and fill in the
the	value of sucl	n assistance an		government assistance in Sluded it on Schedule I: Y			Your exp	enses
(UII	icial Form 10	oi.)					i oui oxp	J550
4.		or home owners and any rent for the		ses for your residence. In or lot.	nclude first mortgag	e 4. \$	\$	760.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	\$	0.00
		rty, homeowner's				4b. \$	·	0.00
				ıpkeep expenses		4c. \$	·	0.00
5		owner's associat		dominium dues our residence , such as ho	me equity loops	4d. 5		0.00
J.	AUUILIOHAH	HOLLWAYE DAVIIII	SILE IUI VI	zur residende, Such as no	IIIE EUUIIV IOAIIS		.u	

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Debtor 1 Bobbie Jean Galmore	Case number (if known)	
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	65.00
6b. Water, sewer, garbage collection	6b. \$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	200.00
6d. Other. Specify:	6d. \$	0.00
7. Food and housekeeping supplies	7. \$	150.00
Childcare and children's education costs	8. \$	
	9. \$	0.00
3, ,, ,	10. \$	30.00
0. Personal care products and services	·	13.00
1. Medical and dental expenses	11. \$	50.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12. \$	75.00
3. Entertainment, clubs, recreation, newspapers, magazines, and book	·	40.00
4. Charitable contributions and religious donations	13. \$	0.00
5. Insurance.	14. Ф	0.00
Do not include insurance deducted from your pay or included in lines 4 or	20	
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	65.00
15d. Other insurance. Specify:	15d. \$	
 Other insurance: Specify. Taxes. Do not include taxes deducted from your pay or included in lines 4 		0.00
 Taxes. Do not include taxes deducted from your pay or included in lines 4. Specify: 	16. \$	0.00
7. Installment or lease payments:	· · ·	2.00
17a. Car payments for Vehicle 1	17a. \$	273.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
3. Your payments of alimony, maintenance, and support that you did no		0.00
deducted from your pay on line 5, Schedule I, Your Income (Official F		
Other payments you make to support others who do not live with you		0.00
Specify:	19.	
Other real property expenses not included in lines 4 or 5 of this form Mortgages on other property.		0.00
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
1. Other: Specify: MISCELLANEOUS	21+\$	25.00
2. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	1,746.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Fo		, <u> </u>
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	1,746.00
		1,740.00
3. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,746.00
23b. Copy your monthly expenses from line 22c above.	23b\$	1,746.00
OOs Cubbrack was a seathly support of the control o		
23c. Subtract your monthly expenses from your monthly income.	23c. \$	0.00
The result is your <i>monthly net income</i> .	200. [*	
4. Do you expect an increase or decrease in your expenses within the y	year after you file this form?	
For example, do you expect to finish paying for your car loan within the year or do you		ase or decrease because o
modification to the terms of your mortgage?		
■ No.		
□ Yes Explain here:		

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Fill in this infe	umation to identify your	••••			
	rmation to identify your				
Debtor 1	Bobbie Jean Galr	Nore Middle Name	Last Name		
Debtor 2	Filst Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	Γ OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For		امريانين المراس	l Dobtorio Sa	ah adulaa	
Declara	tion About a	iii iiiuiviuuai	Debtor's So	illedules	12/15
years, or both. 1	gn Below		n uptcy case can result	iii iiiies up to \$250,000, oi	imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				cy Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sun	nmary and schedules file	ed with this declaration an	ad
X /s/ Bo	bbie Jean Galmore		X		
Bobbi	ie Jean Galmore ure of Debtor 1		Signature o	f Debtor 2	
Date	September 15, 2016		Date		

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Fill	in this info	rmation to identify you	r case:			
Deb	otor 1	Bobbie Jean Ga				
Doh	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States E	Sankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Cas	se number					Observative to a second
(II KIII	iowii)					Check if this is an amended filing
- -	–					
		orm 107	Affaira far Indiv	iduals Eiling for I	Pankruptov	414
				iduals Filing for I		4/10
infor	rmation. If	more space is needed,	attach a separate sheet t	e are filing together, both ar o this form. On the top of a		
num	ber (if knov	wn). Answer every que	stion.			
Par	t 1: Give	Details About Your Ma	arital Status and Where Yo	ou Lived Before		
1.	What is yo	ur current marital statu	ıs?			
	■ Marrie	od.				
	■ Not m					
•			live demonstrate and such as			
2.	During the	last 3 years, nave you	lived anywhere other tha	n where you live now?		
	■ No					
	☐ Yes. L	ist all of the places you l	ived in the last 3 years. Do	not include where you live no	OW.	
	Debtor 1 l	Prior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
3.	Within the	last 8 years, did you ev	ver live with a spouse or I	egal equivalent in a commu	nity property state or territ	ory? (Community property
state	es and territo	ories include Arizona, Ca	lifornia, Idaho, Louisiana, N	levada, New Mexico, Puerto	Rico, Texas, Washington and	l Wisconsin.)
	■ No					
	☐ Yes. N	Make sure you fill out Sci	hedule H: Your Codebtors (Official Form 106H).		
Par	t 2 Evol	ain the Sources of You	ır İncome			
гаі	СХРІ	ani the Sources of Tou	ii iiicoiiie			
				ing a business during this		lendar years?
				d all businesses, including pa ive together, list it only once u		
	■ No	-ill in the details.				
	□ 163.1	iii iii tiio dotalis.				
			Debtor 1	0	Debtor 2	0
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

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5.	Inclu and winr	other other nings. each s	come regard public benef If you are fili	lless of wheth fit payments; ng a joint cas he gross inco	er that inco pensions; r e and you	ome is taxable. Ex rental income; inte have income that	amples of erest; divi you rece	dends; money colle vived together, list i	alimony; child sup	s; royalties; ar Debtor 1.	Security, unemployment, and gambling and lottery
					Debtor 1				Debtor 2		
						of income below.	each (befo	ss income from a source ore deductions and usions)	Sources of in Describe belo		Gross income (before deductions and exclusions)
			1 of currei iled for bar	nt year until ikruptcy:	SOCIAL	SECURITY		\$8,440.00)		
			dar year: December	31, 2015)	SOCIAL	SECURITY		\$12,660.00)		
					INCOME REFUND			\$2,527.00)		
			dar year be December		SOCIAL	SECURITY		\$12,660.00)		
Pa	rt 3:	List	Certain Pa	yments You	Made Befo	ore You Filed for	Bankru	ptcy			
6.	Are □	eithe i No.	Neither De	ebtor 1 nor D	ebtor 2 ha	rimarily consume as primarily cons family, or househo	umer de	bts. Consumer de	<i>bt</i> s are defined in 1	1 U.S.C. § 10	01(8) as "incurred by an
			During the No.	-	-	l for bankruptcy, d	lid you pa	ay any creditor a to	tal of \$6,425* or m	ore?	
			□ No. □ Yes	Go to line 7				- (00 405+			h a tatal a second con-
				paid that cre not include	editor. Do r payments t	not include payme to an attorney for t	nts for do this bank	omestic support ob ruptcy case.		child support a	the total amount you and alimony. Also, do
		Yes.				re primarily cons If for bankruptcy, d			tal of \$600 or more	e?	
			■ No.	Go to line 7							
Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. I include payments for domestic support obligations, such as child support and alimony. Also, do not include pay attorney for this bankruptcy case.											
	Cre	editor'	s Name and	d Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for
7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corpo of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									eral partner; corporations gagent, including one fo		
				nents to an ins	sider.					_	
	Ins	ıder's	Name and	Address		Dates of payme	ent	Total amount paid	Amount you still owe	Reason fo	or this payment

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8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	ny property on a	ccount of a d	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below. No. Go to line 11.		rty repossessed, fo	oreclosed, garnis	hed, attached	d, seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened			property	
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date:	action was	Amount
				taken		
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No					
	☐ Yes					
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup No	otcy, did you give any gifts	s with a total value	of more than \$60	0 per person	?
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts		Dates	you gave	Value
	per person	bescribe the girts		the gi		Value
	Person to Whom You Gave the Gift and Address:					
14.	■ No		s or contributions v	vith a total value	of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cor			Data		Walasa
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you	contributed	Dates	s you ibuted	Value
Par	t 6: List Certain Losses					

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Official Form 107

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Document Page 38 of 52 Case number (if known) Debtor 1 **Bobbie Jean Galmore** or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You **MICHELSON LAW OFFICE** ATTORNEY FEES + COSTS + FILING \$1,400.00 **617 - 6TH STREET RACINE, WI 53401-0067** amichelson@michelsonlawracine.com Summit Financial Education, Inc. \$10 PAID FOR CREDIT COUNSELING \$10.00 **Central Bankruptcy** PO Box 1893 Spartanburg, SC 29304 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο П Yes. Fill in the details. **Person Who Received Transfer** Describe any property or Description and value of Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Description and value of the property transferred

Yes. Fill in the details.

Name of trust

Date Transfer was

made

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Debtor 1 **Bobbie Jean Galmore**

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

	ziot di dortami i mandiai / todoanto, mo	aoo, care Dopoe	it Boxoo, and ott	orago ornic	•	
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benesold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions houses, pension funds, cooperatives, associations, and other financial institutions. No				,		
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed fo	or bankruptcy, an	ıy safe dep	osit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe t	the contents	Do you still have it?
22.	Have you stored property in a storage unit o	r place other than you	r home within 1	year befor	e you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe t	the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control f	or Someone Else				
23.	Do you hold or control any property that son for someone.	neone else owns? Inc	lude any propert	y you borr	owed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe t	the property	Value
Par	t 10: Give Details About Environmental Info	rmation				
For	the purpose of Part 10, the following definition	ns apply:				
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.					
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	•	environmental la	aw, whethe	er you now own, operate	, or utilize it or used
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.					
Rep	ort all notices, releases, and proceedings tha	t you know about, reç	ardless of when	they occu	rred.	
24.	Has any governmental unit notified you that	you may be liable or p	ootentially liable	under or i	n violation of an environn	nental law?
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental u Address (Number, ZIP Code)	n it Street, City, State and		onmental law, if you it	Date of notice

Case 16-29449 Doc 1 Filed 09/15/16 Entered 09/15/16 14:34:42 Document Page 40 of 52 ase number (if known) Debtor 1 **Bobbie Jean Galmore** 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Bobbie Jean Galmore Signature of Debtor 2 Date

Bobbie Jean Galmore Signature of Debtor 1 Date September 15, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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Case number (if known) Document

Debtor 1 Bobbie Jean Galmore

page 7

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Fill in this inforn	nation to identify your	case:			
Debtor 1	Bobbie Jean Galr	nore			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
Official For					-
Statemen	it of Intentio	n tor Indiv	iduals Filing Und	der Chapter	12/15
If you are an indi	vidual filing under cha	oter 7, you must fill	out this form if:		
creditors have	claims secured by yo	ur property, or			
You must file this	ver is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petitio e time for cause. You must also		
	ople are filing together	in a joint case, bo	th are equally responsible for s	upplying correct inforn	nation. Both debtors must
	and accurate as possib our name and case nur		needed, attach a separate she	et to this form. On the	top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims			
			: Creditors Who Have Claims S	ecured by Property (Of	ficial Form 106D), fill in the
information be	low.				<i>,</i>
Identify the cre	editor and the property t	nat is collateral	What do you intend to do wit secures a debt?	h the property that	Did you claim the property as exempt on Schedule C?
Creditor's T	urner Acceptance Co	orporation	☐ Surrender the property.		□ No
name:			Retain the property and red		.
Description of	2005 DODGE GRA		Retain the property and enter Reaffirmation Agreement.	er into a	■ Yes
property securing debt:	CARAVAN 184,000	miles	☐ Retain the property and [exp	olain]:	
	our Unexpired Persona		in Schedule G: Executory Cont	racts and Unexpired L	eases (Official Form 106G) fill
in the information	n below. Do not list rea	I estate leases. Un	expired leases are leases that a the trustee does not assume it.	are still in effect; the lea	
Describe your u	nexpired personal prop	perty leases		Wi	II the lease be assumed?
Lessor's name:				_	NI.
Description of lea	sed				No
Property:					Yes
Lessor's name:	and				No
Description of lea Property:	iseu				Yes
Lessor's name:					No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor	1	Bobbie Jean Galmore	Case number (if known)	
Descrip Propert		of leased		П у
riopeit	у.			☐ Yes
Lessor's name: Description of leased				□ No
Propert				☐ Yes
Lessor's		ame: a of leased		□ No
Propert		101104004		☐ Yes
Lessor's		ame: of leased		□ No
Propert		Torreased		☐ Yes
Lessor's				□ No
Propert		of leased		☐ Yes
Part 3:	S	Sign Below		
		alty of perjury, I declare that I have ind at is subject to an unexpired lease.	cated my intention about any property of my estate that sec	ures a debt and any personal
X /s	/ Bo	obbie Jean Galmore	X	
		oie Jean Galmore ture of Debtor 1	Signature of Debtor 2	
Da	ate	September 15, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-29449 Doc 1 Filed 09/15/16 Entered 09/15/16 14:34:42 Desc Main Document Page 48 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	e Bobbie Jean Galmore		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	SATION OF ATTOR	NEY FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,400.00
	Prior to the filing of this statement I have received		\$	1,400.00
	Balance Due		\$	0.00
2.	\$335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed comper	nsation with any other person u	inless they are meml	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
6.	In return for the above-disclosed fee, I have agreed to rend	der legal service for all aspects	of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and renderi b. Preparation and filing of any petition, schedules, staten c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Representation limited solely to preparati credit counseling certificate and form D. 	nent of affairs and plan which is and confirmation hearing, and	may be required; d any adjourned hear	rings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee of anything not listed above.	does not include the following	service:	
		CERTIFICATION		
	I certify that the foregoing is a complete statement of any abankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
	September 15, 2016	/s/ ABRAHAM MIC	HELSON	
_	Date	ABRAHAM MICHE	LSON	
		Signature of Attorney MICHELSON LAW		
		P.O. BOX 67		
		617 - 6TH STREET RACINE, WI 53401		
		262-638-8400 Fax	: 262-638-1818	
		amichelson@mich	nelsonlawracine.	com
1		Name of law firm		

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United States Bankruptcy Court Northern District of Illinois

In re	Bobbie Jean Galmore		Case No.			
		Debtor(s)	— Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
		Number of O	Creditors:	30		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	ors is true and	correct to the best of my		
Date:	September 15, 2016	/s/ Bobbie Jean Galmore Bobbie Jean Galmore Signature of Debtor				

Amerifirst Home Mortgage 950 Trade Centre Way, Ste. 400 Portage, MI 49002

AT&T SBC Bankruptcy Desk P.O. Box 769 Arlington, TX 76004

ChexSystems Attn: Consumer Relations 7805 Hudson Road, Ste. 100 Woodbury, MN 55125-1595

Choice Recovery Attn: Bankruptcy 1550 Old Henderson Road, Suite 100-S Columbus, OH 43220

CitiMortgage, Inc. Attn: Bankruptcy P.O. Box 6243 Sioux Falls, SD 57117-6243

Comcast Corporate Office Headquarters Attn: Bankruptcy One Comcast Center Philadelphia, PA 19103-2838

Consumer Financial Services 300 South Green Bay Road Waukegan, IL 60085

Consumer Financial Services 10431 US Highway 19 Port Richey, FL 34668

Convergent Outsourcing, Inc. PO Box 9004 Renton, WA 98057-9004

Early Warning Services 16552 North 90th Street #100 Scottsdale, AZ 85260

Enhanced Recovery Corporation Attn: Client Services 8014 Bayberry Road Jacksonville, FL 32256

Equifax Information Services LLC P.O. Box 740256 Atlanta, GA 30374-0256

Experian
Attn: Bankruptcy
955 American Lane
Schaumburg, IL 60173-4983

HSBC Attn. Bankruptcy Department PO Box 5213

Carol Stream, IL 60197

Illinois Dept. of Revenue Bankruptcy Section P. O. Box 64338 Chicago, IL 60664-0338

Internal Revenue Service Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19101-7346

JD GALMORE 600 North County Street Apt #6 Batavia, IL 60510

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Nationwide Recovery Service, Inc. 19401 - 40th Avenue W., Ste. 130 Lynnwood, WA 98036

Portfolio Recovery Associates, LLC Attn: Bankruptcy PO Box 41067 Norfolk, VA 23541

Sanders Real Estate Solutions Inc 500 N. Randall Rd. #479 Batavia, IL 60510

Secure 24 Alarm Systems 2258 Schuetz Road, Suite 210 Saint Louis, MO 63132

Select Physical Therapy 15 Tower Court Gurnee, IL 60031

TeleCheck, Inc. Attn: Bankruptcy Department P.O. Box 4451 Houston, TX 77210-4451 The North Shore Podiatry Group 36100 N Brookside Drive, Ste. 105 Gurnee, IL 60031

Trans Union Corporation P.O. Box 2000 Crum Lynne, PA 19022-2002

Turner Acceptance Corporation 4454 N. Western Avenue Chicago, IL 60625

United Credit Co Attn: Bankruptcy 512 Madison St St Charles, MO 63301

United Credit Company Attn: Bankruptcy 512 Madison Street Saint Charles, MO 63301

Vista Health/Waukegan Illinois Hospital 1324 N. Sheridan Road Waukegan, IL 60085-2161